

POLITICAL INQUIRY FORM  
(TO BE COMPLETED BY STATION REPRESENTATIVE RESPONDING TO THE INQUIRY)

**INSTRUCTIONS:** This form must be completed as to all requests, both oral and written, for broadcast time to be used by or on behalf of (1) a candidate for public office or (2) persons who wish to communicate a message relating to "any political matter of national importance," as defined in the Bipartisan Campaign Reform Act of 2002. It is to be kept in the Station Public File for a period of two years.

STATION	MULTIPLE
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DATE OF REQUEST:	8/25/16
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INQUIRY MADE BY: \_\_\_\_\_

AGENCY (if any): \_\_\_\_\_

ADDRESS OF AGENCY: \_\_\_\_\_

CITY, STATE, ZIP OF AGENCY: \_\_\_\_\_

TELEPHONE NUMBER OF AGENCY: \_\_\_\_\_

CANDIDATE: \_\_\_\_\_

ORGANIZATION OR SPONSORING AUTHORITY (WHO WILL PAY): United We Can

IF SPONSOR IS A COMMITTEE, NAME OF COMMITTEE: United We Can

ADDRESS OF COMMITTEE: 1800 Massachusetts Ave NW

CITY, STATE, ZIP OF COMMITTEE: Washington, DC 20036

TELEPHONE NUMBER OF COMMITTEE: 202-730-7000

COMMITTEE OFFICERS:

Chairman: Mary Kay Henry

Vice Chairman: \_\_\_\_\_

Treasurer: Gerry Hudson

Secretary: \_\_\_\_\_

Is this the Candidate's Authorized Committee? ( ) yes ( X ) no

OFFICE SOUGHT: \_\_\_\_\_

PARTY AFFILIATION: \_\_\_\_\_

( ) federal

( ) state

( ) local

ELECTION AND DATE: \_\_\_\_\_

( X ) primary

( ) general

FOR ISSUE ADS ONLY:

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- a. Candidate(s) and offices (if any) referred to: \_\_\_\_\_  
\_\_\_\_\_
- b. Federal election(s) (if any) referred to: \_\_\_\_\_
- c. Issue(s) discussed: \_\_\_\_\_Anti Candidate Darren Soto\_\_\_\_\_
- d. Name, Address, Phone Number of Contact: Immigrant Voters Win PAC 1536 U  
Street NW, Washington DC 20009, 202-339-9340

DATES REQUESTED: \_\_\_\_\_

LENGTH OF SPOT/PROGRAM TIME REQUESTED: \_\_\_\_\_

REQUEST MADE:

☐ in writing ☐ orally  
If request is made in writing, attach and retain.

STATION OFFER: \_\_\_\_\_

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DISPOSITION OF REQUEST:

☐ granted ☐ denied  
If not granted, state reasons in space below. If denied in writing, attach and retain. If  
granted, attach contract and invoice, when available.

REQUEST FOR DOCUMENTATION THAT CANDIDATE IS LEGALLY QUALIFIED:

☐ yes ☐ no  
Attach any written documentation received.

DATE POLITICAL DISCLOSURE FORM SUBMITTED TO REQUESTOR: \_\_\_\_\_

**COMMENTS**

STATION REP	
REVIEWED	